

## MEMORANDUM

Agenda Item No. 11(A)(53)

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**TO:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

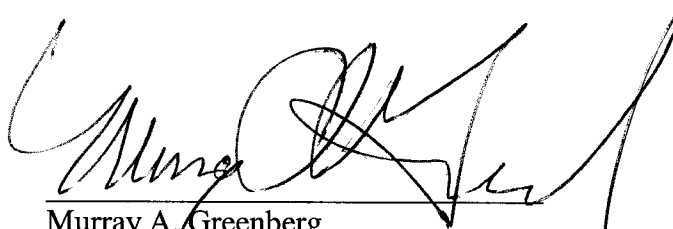
**DATE:** January 25, 2007

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
Fundacion Rockincha Los  
Ninos de la Luz

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The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Joe A. Martinez.

A handwritten signature in black ink, appearing to read 'Murray A. Greenberg', is written over a horizontal line.

Murray A. Greenberg  
County Attorney

MAG/jls



# MEMORANDUM

(Revised)

**TO:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

**DATE:** January 25, 2007

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Agenda Item No. 11(A)(53)

Please note any items checked.

- ☐ "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Bid waiver requiring County Manager's written recommendation
- ☐ Ordinance creating a new board requires detailed County Manager's report for public hearing
- ☐ Housekeeping item (no policy decision required)
- ☒ No committee review

Approved \_\_\_\_\_ Mayor  
Veto \_\_\_\_\_  
Override \_\_\_\_\_

Agenda Item No. 11(A) (53)

01-25-07

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE DECEMBER 10, 2006 2<sup>ND</sup> ANNIVERSARY OF THE FUNDACION SPONSORED BY FUNDACION ROCKINCHA LOS NINOS DE LA LUZ, A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$4,061.00 TO BE FUNDED FROM THE COUNTYWIDE IN-KIND RESERVE FUND

**WHEREAS**, the Fundacion Rockincha Los Niños de la Luz has requested in-kind services from the Miami-Dade Park and Recreation Department for the December 10, 2006 2<sup>nd</sup> Anniversary of the Fundacion in an amount not to exceed \$4,061.00 (see attached Fee Waiver/In-Kind Service Application); and

**WHEREAS**, the Fundacion Rockincha Los Niños de la Luz is a not-for-profit organization; and

**WHEREAS**, the 2<sup>nd</sup> Anniversary of the Fundacion is a small event, as that term is defined in the attached Fee Waiver/In-Kind Service Application, and the in-kind services shall be funded from the Countywide In-kind Reserve Fund,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services from the Miami-Dade Park and Recreation Department for the December 10, 2006 2<sup>nd</sup> Anniversary of the Fundacion in an amount not to exceed \$4,061.00 to be funded from the Countywide In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Joe A. Martinez and offered by Commissioner \_\_\_\_\_, who moved its adoption. The motion was seconded by Commissioner \_\_\_\_\_ and upon being put to a vote, the vote was as follows:

3

Bruno A. Barreiro, Chairman	
Barbara J. Jordan, Vice-Chairwoman	
Jose "Pepe" Diaz	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	Dennis C. Moss
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 25th day of January, 2007. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA  
BY ITS BOARD OF COUNTY  
COMMISSIONERS

HARVEY RUVIN, CLERK

By: \_\_\_\_\_  
Deputy Clerk

Approved by County Attorney as  
to form and legal sufficiency.

WR

Monica Rizo

From: Pro Support CoordinaFax: +1 (888) 880-6185

To: ATTN: MAITTEE

Fax: +1 (305) 552-0477

Page 2 of 3 11/22/2006 12:34 PM

**MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION**

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Special Events Staff  
Communications Department  
111 N.W. 1<sup>st</sup> Street, Suite 2510  
Miami, FL 33128

Phone: (305) 375-2836  
Fax: (305) 375-3958

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application)
- ☒ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☐ Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date)
- ☐ Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

1. Full legal name of the requesting organization. Fundacion Rockincha Los Niños de la Luz

2. Applicant Status: (Select one of the choices below)

- ☒ Not-For-Profit or Tax Exempt ☐ Local Government or Public Entity
- ☐ For-Profit
- ☐ County Sponsored Event/Sponsoring Department \_\_\_\_\_
- ☐ Other (specify): \_\_\_\_\_

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.)

M. Magdalena Luis // Antonio Fernandez, 305.305.1155 // 786.326.4822; 1505 NW 14<sup>th</sup> St. Miami, Florida 33125, fax: 888.880.6185; info@flautisticfoundation.org

4. Specify fee waiver or in-kind service requested (quantify, if applicable)

Open Area: \$225.00; Building: \$364.00; Stage + sound: \$786.00. Total: \$ 1,375.00

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

2nd Anniversary of the Foundation, December 10, 2006. It will be an opportunity to gather with the children and families that we serve to celebrate our anniversary with food, refreshments, and live music.

6. Please select ALL that apply to event

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☒ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☐ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s))

Bird Lake Park located at 4765 SW 144 Ave Miami, FL 33175

MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION

8. Description of regional or local impact: This event will help the community continue to be aware of the problem this county and country is facing with autism.
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):  
Event hours: from 10:00 am to 4:00 pm
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): \_\_\_\_\_
11. Expected number of participants and estimated attendance (per day, if applicable):  
Around 200 guests
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): \_\_\_\_\_

I hereby certify that all the statements made in this application are true and correct.

Signature of Authorized Representative

Date

# Memorandum



**Date:** January 25, 2007

**To:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

**From:** George M. Borges  
County Manager

A handwritten signature in black ink, appearing to read "G. Borges", written over the printed name of the County Manager.

**Subject:** Countywide In-Kind Reserve Request Recommendation

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The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The countywide in-kind reserve balance allows for the funding of this request.

## Background

A retroactive waiver for in-kind services is being requested by a not-for-profit organization Fundacion Rockincha Los Niños de la Luz for their 2<sup>nd</sup> Anniversary of the Foundation event held on December 10, 2006.

In-kind services have been requested in an amount not to exceed \$4,061 from the Park and Recreation Department for use of the stage and facility rental fees. This event will be funded from the countywide in-kind reserve fund.

In FY 2006-07 the Fundacion Rockincha Los Niños has not received any County funding.

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7